

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

RECEIVED
EMAIL
OCT 30 2007

COMMITTEE NAME (Must be same as on Statement of Organization)

Carl Foster for Mayor

IMPORTANT: Indicate by # type of committee you are reporting for: 6

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party (if applicable)

Carl Foster

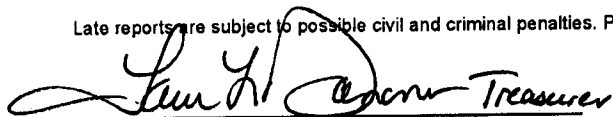
Office Sought

District (if Senate or House)

Mayor of Marion

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	_____
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a


Treasurer

319.373-5700

TELEPHONE

10/30/07

DATE SIGNED

SIGNATURE OF PERSON FILING REPORT

I AM FILING A November 1, 2007 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
November 6, 2007
County & Local Committees, enter County in
which Election is held
Linn

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 0.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

6,395.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 6,395.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

6,035.41

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

359.59

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 0.00

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 1,340.82

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Carl Foster for Mayor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4/11/07	ID# CK#	BD and Barbara Cooper 575 Aspen Lane, Robins, Iowa 52328		\$500.00	<input type="checkbox"/>
5/15/07	ID# CK#	Barry and Toni Smith 2130 Blue Heron Drive, Springville, Iowa 52336		500.00	<input type="checkbox"/>
5/15/07	ID# CK#	James and Loretta Copper 2331 S 22nd Street, Marion, Iowa 52302		250.00	<input type="checkbox"/>
5/15/07	ID# CK#	Kathy Lovell 240 Valley View Drive, Marion, Iowa 52302	daughter	20.00	<input type="checkbox"/>
5/21/07	ID# CK#	Robert and Mary Rathje 2640 Victoria Street, Marion, Iowa 52302		500.00	<input type="checkbox"/>
5/21/07	ID# CK#	JD Schlotterback 2390 Rosewood Ridge Ct, Marion, Iowa 52302		200.00	<input type="checkbox"/>
5/21/07	ID# CK#	Waldo Morris 4512 Lakeside Road, Marion, Iowa 52302		100.00	<input type="checkbox"/>
5/21/07	ID# CK#	Donald and Janet Patschke 2150 Edwin Ct, Marion, Iowa 52302		100.00	<input type="checkbox"/>
5/23/07	ID# CK#	Thomas and Victoria Barnes 920 Williams Drive, Marion, Iowa 52302		200.00	<input type="checkbox"/>
5/23/07	ID# CK#	Jeannette Fletcher 775 Hampshire Drive, Marion, Iowa 52302		500.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2870.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)		MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be same as on Statement of Organization)

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5/25/07	ID# CK#	Harold Berret 805 50th Street, Marion, Iowa 52302		\$250.00	<input type="checkbox"/>
5/29/07	ID# CK#	Jane Shaffer 2355 Edwin Drive, Marion, Iowa 52302		500.00	<input type="checkbox"/>
6/12/07	ID# CK#	Jim Brown 520 Phacton Drive, Robins, Iowa 52328		500.00	<input type="checkbox"/>
6/12/07	ID# CK#	Dean Montour 320 35th Street, Marion, Iowa 52302		500.00	<input type="checkbox"/>
7/16/07	ID# CK#	Drew Retz 501 B Avenue, Atkins, Iowa		200.00	<input type="checkbox"/>
7/18/07	ID# CK#	William Hontoon 1325 C Avenue, Marion, Iowa 52302		250.00	<input type="checkbox"/>
7/23/07	ID# CK#	Andy Anderson 318 Revere Ct NE, Cedar Rapids, Iowa 52402		100.00	<input type="checkbox"/>
8/1/07	ID# CK#	Charles Knudsen 2835 24th Avenue, Marion, Iowa 52302		100.00	<input type="checkbox"/>
8/2/07	ID# CK#	James Mollenhauer 3121 Silver Oak Trail, Marion, Iowa 52302		100.00	<input type="checkbox"/>
9/12/07	ID# CK#	Thomas and Mari Dougherty 822 Knollwood Ct, Waukesha, WI 53188		50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 2550.00

TOTAL (if last page of this schedule)

\$

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Page 2 of 4
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
9/14/07	ID# CK#	Jerry Rogers 23585 Fairview Road, Anamosa, Iowa		\$100.00	<input type="checkbox"/>
9/25/07	ID# CK#	Morris Neighbor 2310 Empire Street, Marion, Iowa 53202		100.00	<input type="checkbox"/>
9/26/07	ID# CK#	Donald and Janet Patschke 2150 Edwin Ct, Marion, Iowa 52302		100.00	<input type="checkbox"/>
9/26/07	ID# CK#	Judy Decker 2665 Hunter Ridge Road, Marion, Iowa 52302		100.00	<input type="checkbox"/>
10/1/07	ID# CK#	Scot Miller 3117 Steggals Road, Springville, Iowa 52336		200.00	<input type="checkbox"/>
10/1/07	ID# CK#	Rich Bleakley 605 Rosedale Road, Cedar Rapids, Iowa 52403		50.00	<input type="checkbox"/>
10/1/07	ID# CK#	Dan Trimble 895 8th Avenue, Marion, Iowa 52302		50.00	<input type="checkbox"/>
10/1/07	ID# CK#	Jim Bouslog 4613 Indian Creek Road, Marion, Iowa 52302		50.00	<input type="checkbox"/>
10/1/07	ID# CK#	Victor Klopfenstein 5540 Hunter's Ridge Court, Marion, Iowa 53202		50.00	<input type="checkbox"/>
10/1/07	ID# CK#	William Jacobs 350 8th Avenue, Marion, Iowa 52302		50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 850.00

TOTAL (if last page of this schedule)

\$

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Page 3 of 4
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

1

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/11/07	ID# CK#	Lumir and Sara Dostal 2775 Heatherview Circle, Marion, Iowa 52302		\$25.00	<input type="checkbox"/>
10/11/07	ID# CK#	Doug Neighbor 2835 Clubhouse Drive, Marion, Iowa 52302		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 125.00	
TOTAL (if last page of this schedule)				\$ 6395.00	

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Page 4 of 4
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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☐ CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Carl Foster for Mayor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/28/2007	ID# CK# 1000	Leap Frog Graphics 1862 E Avenue NE Cedar Rapids, Iowa 52402	Yard signs	\$ 1017.60
8/10/2007	ID# CK# 1001	Leap Frog Graphics 1862 E Avenue NE Cedar Rapids, Iowa 52402	Large signs - 18	1144.80
9/15/07	ID# CK# 1002	Lois Foster 1004 Dry Creek Lane Marion, Iowa 52302	Parade supplies, candy, poster board, etc	186.30
9/26/07	ID# CK# 1003	Lamar Advertising P.O. Box 96030 Baton Rouge, LA 70896	2 Billboards 9/10 to 10/9	1600.00
9/27/07	ID# CK# 1004	Carl Foster 1004 Dry Creek Lane Marion, Iowa 52302	Misc parade supplies, buttons, magnets, printing, etc	386.71
10/1/07	ID# CK# 1005	Marion Times 806 6th Street Suite 1 Marion, Iowa 52302	Political Ad	300.00
10/26/07	ID# CK# 1006	Lamar Advertising P.O. Box 96030 Baton Rouge, LA 70896	2 billboards 10/10 to 11/5	1400.00
	ID# CK#			
SUB-TOTAL				\$ 6035.41
TOTAL (if last page of this schedule)				\$6,035.41

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Carl Foster for Mayor

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (If applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/15/07	John Foster Marion, Iowa	Son	business card printing	\$ 72.80	<input type="checkbox"/>
10/15/07	Carl Foster 1004 Dry Creek Lane Marion, Iowa 52302		Mailing materials	852.29	<input type="checkbox"/>
10/15/07	Carl Foster 1004 Dry Creek Lane Marion, Iowa 52302		Misc copies, etc	128.53	<input type="checkbox"/>
10/26/07	Carl Foster 1004 Dry Creek Lane Marion, Iowa 52302		Mileage 624.50 x .46	287.20	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 1,340.82	
TOTAL (if last page of this schedule)				\$ 1,340.82	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)